

MONTGOMERY AREA ASSOCIATION OF REALTORS®
4280 CARMICHAEL ROAD ~ MONTGOMERY, ALABAMA 36106

COMPLAINT (ETHICS)

To the Grievance Committee of the Montgomery Area Association of REALTORS®

Date Filed _____

Respondent (s)

Complainant (s)

Complainant(s) charge(s):

An alleged violation of Article(s) _____ of the Code of Ethics or other membership duty as set forth in the Bylaws of the Association in _____
(Article, Section)

and alleges that the above charge(s) (is/are) supported by the attached statement, which is signed and dated by the complainant(s). ***(Please number each page of the statement and any supporting documentation submitted.)***

This complaint is true and correct to the best knowledge and belief of the undersigned and is filed within one hundred eighty (180) days after the facts constituting the matter complained of could have been known in the exercise of reasonable diligence or within one hundred eighty (180) days after the conclusion of the transaction, whichever is later.

I (we) declare that to the best of my (our) knowledge and belief, my (our) allegations in this complaint are true.

Are the circumstances giving rise to this ethics complaint involved in civil or criminal litigation or in any proceeding before the state real estate licensing authority or any other state federal regulatory or administrative agency:

_____ Yes _____ No.

You may file an ethics complaint in any jurisdiction where a REALTOR® is a member or MLS participant. Note that the REALTOR® Code of Ethics, Standard of Practice 14-1 provides, in relevant part, "REALTORS® shall not be subject to disciplinary proceeding in more than one Board of REALTORS®...with respect to alleged violations of the Code of Ethics relating to the same transaction or event."

Have you filed, or do you intend to file, a similar or related complaint with another Association(s) of REALTORS®?

_____ Yes _____ No

If so, name of other Association(s): _____ Date(s) filed: _____

I understand that should the Grievance Committee dismiss this ethics complaint in part or in total, that I have twenty (20) days from my receipt of the dismissal notice to appeal the dismissal to the Board of Directors.

COMPLAINANT(S):

_____ (Type/Print)

_____ (Signature)

_____ (Type/Print)

_____ (Signature)

_____ (Type/Print)

_____ (Signature)

Address: _____

Phone Number: _____

Email: _____